



Incident Report

Print Date/Time: 06/22/2016 09:07
Login ID: ss0139

Lake Stevens Police Department
ORI Number: WA0311900

Incident: 2016-00011932

Incident Date/Time: 6/21/2016 8:40:52 AM
Location: 2430 CEDAR RD
LAKE STEVENS WA 98258
Phone Number: (425) 334-6811
Report Required: No
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens
Source: 911
Priority: 2
Status: 2
Nature of Call:

Unit/Personnel

Unit	Personnel
19D2	SS0127-Adams
19D3	SS0130-Rutherford
19D4	
19S15	SS0126-Hingtgen

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Driver	LINDSAY, ROBIN LYNAE				Female	06/28/1956
2	Reporting Party	SCHMUCK, GABRIEL		(425) 334-6811			

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle	Passenger Car					658YKI	
Victim Vehicle						768ZWR	
Victim Vehicle						B21458U	

Disposition(s)

Disposition	Count
R	1

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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CAD Narrative

06/21/2016 : 09:23:34 ss0130 Narrative: insurance info- gary schmuck- b21458u-pemco CA0423837, 768zwr zach schmuck, pemco CA0423837.

06/21/2016 : 09:08:51 SP0371 Narrative: 19D4 LOGGED IN ERROR

06/21/2016 : 08:56:04 ss0126 Narrative: Farmers Insurance #186507481

06/21/2016 : 08:49:21 SP0371 Narrative: FOR SHOW UP W/ RP

06/21/2016 : 08:49:04 SP0371 Narrative: RP ON BOARD

06/21/2016 : 08:46:12 SP0137 Narrative: WITNESS INFO: WILSON, REBECCA 360-926-5211 LR137

06/21/2016 : 08:43:50 SP0137 Narrative: Narrative added from associated Call #: 311 - VEH FLED WB N/O LAKEVIEW RD

06/21/2016 : 08:43:20 SP0152 Narrative: NON INJ AT LOC, UNK IF INJ IN FLEEING VEH

06/21/2016 : 08:42:44 SP0137 Narrative: Narrative added from associated Call #: 311 - AC GRY HONDA CIVIC W/2 FLAGS ON IT, HIT A PARKED VEH AND THEN FLED

06/21/2016 : 08:42:37 SP0152 Narrative: GRY COMPACT W/BIKE RACK ON TOP L/658YXI OR YXL

06/21/2016 : 08:42:04 SP0152 Narrative: VEH L/S SB ON CEDAR

06/21/2016 : 08:41:40 SP0152 Narrative: CC, J/OVEH INTO RP'S PARKED VEH THEN FLED



LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 2016-11937VICTIM ☐ WITNESS ☒NON-DISCLOSURE ☐

NAME (LAST, FIRST, MIDDLE)	RACE	ETHNICITY	SEX	D.O.B.	AGE	HGT	WGT	HAIR	EYES
Schmuck, Gabriel	White	White	M	8-20-84	32	5'6"	160	Blk	Blu
STREET ADDRESS			CITY		STATE		ZIP		
2430 Cedar Rd.			Lake Stevens		WA		98258		
HOME PHONE		CELL PHONE		WORK PHONE					
(425) 334-6822									
EMAIL ADDRESS (OPTIONAL)				PLACE OF EMPLOYMENT					
				Unemployed					

STATEMENT:

On this day, Jun 21st, 2016, I witnessed a vehicle fly through our front ditch, bounce out in to our driveway, and crash into two parked vehicles (one truck, one car) and within seconds back up and take off South on Cedar Rd.

The car was not moved, but the truck was moved back one foot. Significant front end damage to the truck, and minor damage to the car.

Before getting in the ditch, she took out a neighbour's mailbox.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE:

DATE SIGNED:

6-22-2016

OFFICER/NUMBER:

DATE SIGNED:

6/21/16

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURING JUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE, HEALTHY, AND PROSPEROUS COMMUNITY"

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LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 2016 - 11932

VICTIM ☒ WITNESS ☐

NON-DISCLOSURE ☐

NAME (LAST, FIRST, MIDDLE) <u>Schmuck, Zachary, Jordan</u>		RACE <u>White</u>	ETHNICITY <u>Caucasian</u>	SEX <u>M</u>	D.O.B. <u>6/11/92</u>	AGE <u>24</u>	HGT <u>5'6"</u>	WGT <u>155</u>	HAIR <u>Brown</u>	EYES <u>Blue</u>
STREET ADDRESS <u>2430 Cedar Road</u>				CITY <u>Lake Stevens</u>		STATE <u>WA</u>		ZIP <u>98258</u>		
HOME PHONE <u>(425) 334-6811</u>		CELL PHONE <u>(425) 315-3360</u>			WORK PHONE					
EMAIL ADDRESS (OPTIONAL)					PLACE OF EMPLOYMENT <u>USAR</u>					

STATEMENT:

Cars LIC # is 768-2WR. I wake up this morning by my parents who told me my car had been partially hit by a driver. Damage is on the front right side of the car. Visible scratches and cracks.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED: <u>6/28/1992</u>
OFFICER/NUMBER: <u>300</u>	DATE SIGNED: <u>6/21/16</u>

OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURING JUSTICE AND GUARDING DEMOCRACY ARE VITAL TO A SAFE, HEALTHY, AND PROSPEROUS COMMUNITY"

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VICTIM ☒ WITNESS ☐

NAME (LAST, FIRST, MIDDLE) Schmuck, Gary Lee		RACE W	ETHNICITY Cauc	SEX M	D.O.B. 3-10-59	AGE 66	HGT 5-7	WGT 180	HAIR GRY	EYES BLU
STREET ADDRESS 2430 CEDAR RD					CITY LAKE STEVENA		STATE WA		ZIP 98258	
HOME PHONE 425334-6811			CELL PHONE 425-870 6881			WORK PHONE				
EMAIL ADDRESS (OPTIONAL)						PLACE OF EMPLOYMENT UNEMPLOYED				

Woke to son telling us he saw someone
drive in to our yard and hit two vehicles
that were parked next to our driveway.
Also took out mail box of neighbor
I am the owner of the Ford F-150

SIGNATURE: 	DATE SIGNED: 6/21/16
OFFICER/NUMBER: 	DATE SIGNED: 6/21/16

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**STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT**


1591971

REPORT NO. E556066
CASE # 2016-00011932
LOCAL AGENCY CODING
TOTAL # OF UNITS 03 OBJECT STRUCK MAILBOX
TRIBAL RESERVATION
DATE OF COLLISION 06 - 21 - 2016 **TIME (2400)** 0840 **COUNTY #** 31 **MILES** N ☐ E ☐ IN ☒ S ☐ W ☐ **CITY #** 0664

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ **NON-INTERSECTION** ☒
CEDAR RD **BLOCK NO.** ☒ **2430** **MILE POST**
DISTANCE 300 **00** **MILES** ☒ N ☐ E ☐ **FOREST RD** ☒ S ☐ W ☐
UNIT 01 **MOTOR VEHICLE** ☒ **PEDAL-CYCLE** ☐ **DAMAGE THRESHOLD MET** YES ☒ NO ☐ **PHONE** D: 4253446599

LAST NAME LINDSAY **FIRST NAME** ROBIN **MIDDLE INITIAL** L

STREET NEW ADDRESS 11215 30TH ST NE

CITY LAKE STEVENS **ST** WA **ZIP** 98258

CDL **RESTRICTIONS** **ENDORSEMENTS**
DRIVER'S LICENSE # LINDSRL444L8 **STATE** WA **SEX** F **D.O.B.** 06 - 28 - 1956

ON DUTY ☐ **STATUS** **AIRBAG** 2 **RESTR.** 4 **EJECT** 1 **HELMET USE** 2 **INJURY CLASS** 1 **NATURE OF INJURIES**
LICENSE PLATE # 658YKI **STATE** WA **VIN#** JHMGE87439S024137

TRAILER PLATE # **STATE** **TRAILER PLATE #** **STATE**
VEH. YEAR 2009 **MAKE** HOND **MODEL** FIT **STYLE** 4H **VEHICLE TOWED** YES ☐ NO ☒ **TOWED BY** **GOVT. VEHICLE** YES ☐ NO ☒
REGISTERED OWNER INFO. OWNED BY DRIVER
LIABILITY INSURANCE IN EFFECT ☒ **INSURANCE CO & POLICY #** FARMERS 186507481

VEHICLE LEGALLY STANDING YES ☐ NO ☐ **CITATION #** **CHARGE**
UNIT 02 **MOTOR VEHICLE** ☒ **PEDAL-CYCLE** ☐ **PEDESTRIAN** ☐ **PROPERTY OWNER** ☐ **DAMAGE THRESHOLD MET** YES ☒ NO ☐ **PHONE**
LAST NAME UNKNOWN **FIRST NAME** **MIDDLE INITIAL**
STREET NEW ADDRESS
CITY **ST** **ZIP**
CDL **RESTRICTIONS** **ENDORSEMENTS**
DRIVER'S LICENSE # **STATE** **SEX** U **D.O.B.** - -

ON DUTY ☐ **STATUS** **AIRBAG** 2 **RESTR.** 1 **EJECT** 1 **HELMET USE** 2 **INJURY CLASS** 1 **NATURE OF INJURIES**
LICENSE PLATE # B21458U **STATE** WA **VIN#** 1FTEX14H6RKA11366

TRAILER PLATE # **STATE** **TRAILER PLATE #** **STATE**
VEH. YEAR 1994 **MAKE** FORD **MODEL** F150 **STYLE** PK **VEHICLE TOWED** YES ☐ NO ☒ **TOWED BY** **GOVT. VEHICLE** YES ☐ NO ☒
REGISTERED OWNER INFO. GARY SCHMUCK 2430 CEDAR RD LAKE STEVENS WA 98258 D: 4253346811
LIABILITY INSURANCE IN EFFECT ☒ **INSURANCE CO & POLICY #** PEMCO CA0423837

VEHICLE LEGALLY STANDING YES ☐ NO ☐ **CITATION #** **CHARGE**
OFFICER'S NAME (PRINT) M. HINGTEN **BADGE OR ID #** 0126 **AGENCY** WA0311900


**STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT**


1591972

CORRECTION

REPORT NO. **E556066**CASE # **2016-00011932**
ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		SCHMUCK GABRIEL L													
ADDRESS & PHONE # 2430 CEDAR RD LAKE STEVENS WA 98258 4253346811										SEX M	D.O.B. MMDDYYYY 08	-	20	-	1984
PASSENGER <input type="checkbox"/>	WITNESS <input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-	
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)															
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-	
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS	NATURE OF INJURIES

NARRATIVE

Veh #1 was traveling southbound in the 2500 blk of Cedar Rd. The driver stated that she heard a audible alarm coming from the area of the Lake Stevens High School that distracted her. While she was distracted by the alarm, she exited the roadway to the right/west and entered the shoulder/ditch area in front of 2430 Cedar Rd. When Veh #1 exited the roadway, it first struck a large mailbox with cemented base, immediately followed by a large deep ditch. Veh #1 then continued through the front yard and struck both Veh #2 and Veh #3.

The driver of Veh #1 stated that she panicked and left the scene. She was stopped by a traffic stop approximately 12 blocks away. The vehicle owners of Veh #2 and #3 stated that they just wanted her insurance information for a report and did not want to pursue criminal charges.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

M. HINGTGEN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

06-21-16 04:00 PM

DATED

PLACE SIGNED

APPROVED BY

ROBERT MINER 0095

DATE

6/22/2016 7:08:25 AM

BADGE OR ID #	0126	ORI #	WA0311900	TIME POLICE DISPATCHED	8:41 AM	TIME POLICE ARRIVED	8:44 AM
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**SUPPLEMENTAL
POLICE TRAFFIC
COLLISION REPORT**

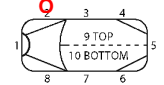

013197

REPORT NO. E556066
CASE # 2016-00011932
COMMERCIAL MOTOR CARRIER

 INTERSTATE ☐ INTRASTATE ☐
UNIT # ☐ **USDOT** ☐ **IOC #** ☐ **VEHICLE TYPE** ☐ **CARGO BODY TYPE** ☐
CARRIER NAME ☐
CARRIER ADDRESS ☐
CITY ☐ **ST** ☐ **ZIP** ☐
NAME SOURCE ☐ **# AXLES** ☐ **GVWR** ☐ **PLACARD** ☐ **+** ☐ **NAME IF NO NUMBER** ☐
ADDITIONAL UNITS
UNIT # **3** **MOTOR VEHICLE** ☒ **PEDAL-CYCLE** ☐ **PEDESTRIAN** ☐ **PROPERTY OWNER** ☐ **DAMAGE THRESHOLD MET** **YES** ☐ **NO** ☒ **PHONE** ☐
LAST NAME **UNKNOWN** **FIRST NAME** ☐ **MIDDLE INITIAL** ☐
STREET NEW ADDRESS ☐
CITY ☐ **ST** ☐ **ZIP** ☐
CDL ☐ **RESTRICTIONS** ☐ **ENDORSEMENTS** ☐
DRIVER'S LICENSE # ☐ **STATE** ☐ **SEX** **U** **D.O.B.** **MMDDYYYY** ☐ - ☐ - ☐
ON DUTY ☐ **STATUS** ☐ **AIRBAG** **9** **RESTR.** **9** **EJECT** **9** **HELMET USE** **9** **INJURY CLASS** **0** **NATURE OF INJURIES** ☐
LICENSE PLATE # **768ZWR** **STATE** **WA** **VIN#** **1MEFM50U02G640149**
TRAILER PLATE # ☐ **STATE** ☐ **TRAILER PLATE #** ☐ **STATE** ☐
VEH. YEAR **2002** **MAKE** **MERC** **MODEL** **SABLE** **STYLE** **4D** **VEHICLE TOWED** **YES** ☐ **NO** ☒ **TOWED BY** ☐ **GOVT. VEHICLE** **YES** ☐ **NO** ☒

 REGISTERED OWNER INFO. **ZACHARY SCHMUCK 2430 CEDAR RD LAKE STEVENS WA 98258 D: 4253153360**
LIABILITY INSURANCE IN EFFECT ☐ **INSURANCE CO & POLICY #** ☐
VEHICLE LEGALLY STANDING **YES** ☐ **NO** ☐ **CITATION #** ☐ **CHARGE** ☐

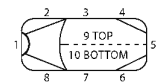
SHADE IN DAMAGED AREA


UNIT # ☐ **MOTOR VEHICLE** ☐ **PEDAL-CYCLE** ☐ **PEDESTRIAN** ☐ **PROPERTY OWNER** ☐ **DAMAGE THRESHOLD MET** **YES** ☐ **NO** ☐ **PHONE** ☐
LAST NAME ☐ **FIRST NAME** ☐ **MIDDLE INITIAL** ☐
STREET NEW ADDRESS ☐
CITY ☐ **ST** ☐ **ZIP** ☐
CDL ☐ **RESTRICTIONS** ☐ **ENDORSEMENTS** ☐
DRIVER'S LICENSE # ☐ **STATE** ☐ **SEX** ☐ **D.O.B.** **MMDDYYYY** ☐ - ☐ - ☐
ON DUTY ☐ **STATUS** ☐ **AIRBAG** ☐ **RESTR.** ☐ **EJECT** ☐ **HELMET USE** ☐ **INJURY CLASS** ☐ **NATURE OF INJURIES** ☐
LICENSE PLATE # ☐ **STATE** ☐ **VIN#** ☐
TRAILER PLATE # ☐ **STATE** ☐ **TRAILER PLATE #** ☐ **STATE** ☐
VEH. YEAR ☐ **MAKE** ☐ **MODEL** ☐ **STYLE** ☐ **VEHICLE TOWED** **YES** ☐ **NO** ☐ **TOWED BY** ☐ **GOVT. VEHICLE** **YES** ☐ **NO** ☐

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐ **INSURANCE CO & POLICY #** ☐
VEHICLE LEGALLY STANDING **YES** ☐ **NO** ☐ **CITATION #** ☐ **CHARGE** ☐

SHADE IN DAMAGED AREA



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

M. HINGTGEN
06-21-16 04:00 PM

INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST DET

DATED: PLACE SIGNED

BADGE OR ID # **0126** **ORI #** **WA0311900** **APPROVED BY** **MINER** **DATE** **6/22/2016** **PAGE** **3** **OF** **4**

REPORT NO. E556066

CASE # 2016-00011932

DATE AND TIME
OF COLLISION 06/21/16 08:40

